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7590

09/27/2005

Thomas M. Saunders
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12/30/2005 HVUONG2 00000052 500369 09650584

01 FC:2501 700.00 DA

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Christine M. Cifro

(Depositor's name)



(Signature)

December 27, 2005

(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/650,584	08/30/2000	Howard N. Straub	RES-101A	9208

TITLE OF INVENTION: OPHTHALMIC DEVICE AND METHOD OF MANUFACTURE AND USE

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	12/27/2005

EXAMINER	ART UNIT	CLASS-SUBCLASS
BUI, VY Q	3731	604-008000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

Thomas M. Saunders

Brown Rudnick

2 Berlack Israels LLP

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Restorvision, Inc.

Englewood, Colorado

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
- ☐ Publication Fee (No small entity discount permitted)
- ☒ Advance Order - # of Copies 5

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- ☐ A check in the amount of the fee(s) is enclosed.
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- ☒ The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number 50-0369 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

The Director of the USPTO is requested to apply the Issue Fee and Publication Fee (if any) or to re-apply any previously paid issue fee to the application identified above.

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature

Date December 27, 2005Typed or printed name Thomas M. SaundersRegistration No. 29,585

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

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TRANSMITTAL OF PAYMENT OF ISSUE FEE (Small Entity) (37 C.F.R. §1.310)				Docket No. 22940/2
In Re Application Of: Howard N. Straub				
Serial No. 09/650,584	Filing Date 08/30/2000	Examiner Vy W. Bui	Group Art Unit 3731	Confirmation No. 9208
Invention: OPTHALMIC DEVICE AND METHOD OF MANUFACTURE AND USE				

TO THE COMMISSIONER FOR PATENTS
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Transmitted herewith are the following for the above-identified application.

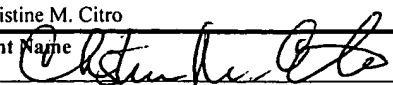
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☒ Utility Fee \$700.00 ☐ Design Fee _____ ☐ Plant Fee \$ _____
☐ Publication Fee \$ _____
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☐ A check in the amount of \$ _____ is attached.
☒ The Commissioner is hereby authorized to charge the above fee of \$715.00 to Deposit Account No. 500369. A duplicate copy of this sheet is enclosed.
☒ Other: Return postcard



Signature

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Dated: December 27, 2005

<u>CERTIFICATE OF FIRST CLASS MAIL</u> I hereby certify that this paper (along with any paper referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the: MAIL STOP ISSUE FEE, Commissioner of Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on: <u>December 27, 2005</u> Christine M. Citro Print Name  _____ Signature
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